



SPECIAL EVENT APPLICATION

NOTICE: THE BUREAU OF PARKS DOES NOT PROVIDE EQUIPMENT. YOU ARE RESPONSIBLE FOR SECURING ALL EQUIPMENT AND/OR OTHER CITY SERVICES. IF YOU ARE REQUESTING USE OF CITY EQUIPMENT, YOU MUST CONTACT THE DPW SPECIAL EVENT/PERMIT OFFICE (410)396-1916, MUNICIPAL BLDG., 200 N. HOLIDAY ST., LOBBY, 21202 AT LEAST SIX (6) WEEKS PRIOR TO YOUR EVENT.

1. Organization applying for Special Event Permit:

ORGANIZATION: _____
TELEPHONE: () _____ FAX () _____
ADDRESS: _____
Street City State Zip Code

2. Person responsible for conducting the special event, solicitation or public assembly:

NAME (AND TITLE): _____
TELEPHONE: () _____ PAGER () _____
ADDRESS: _____
Street City State Zip Code

3. Name of event? _____

4. Type of Event (PLEASE CHECK AS MANY AS APPLICABLE BELOW):

☐ Assembly (Public) ☐ Entertainment ☐ Parade (*) ☐ Solicitation (Donations)
☐ Concert ☐ Environmental ☐ Race (Foot) (*) ☐ Solicitation (Petition)
☐ Educational ☐ Leafleting ☐ Rally ☐ Walk-A-Thon (*)

OTHER (Please describe): _____

(*) NOTICE: PARADES/RACES/WALK-A-THONS — A COPY OF YOUR PROPOSED ROUTE AND/OR MAP, INCLUDING ASSEMBLY AND DISBANDING AREA MUST BE ATTACHED TO THIS APPLICATION. ALSO, PLEASE CONTACT THE DPW SPECIAL EVENTS OFFICE (410)396-1916 TO APPLY FOR A PERMIT.

5. What is the purpose of the event? (please explain, or attach a copy of your agenda or planned activities)

6. Requested Date(s) and Times(s) for this event are as follows (please fill in below): **NOTICE: NO RAIN DATES. NOT MORE THAN FIVE (5) EVENT DATES (CONSECUTIVE OR NON CONSECUTIVE) PER APPLICATION OR LOCATION. ALSO NOTE: IF MORE THAN ONE (1) DATE IS REQUESTED, THERE IS A FEE OF \$10.00 PER ADDITIONAL DAY REQUESTED (IN ADDITION TO THE REGULAR APPLICATION FEE).**

EVENT ACTIVITIES	STARTING DATE(S)	ENDING DATE(S)	STARTING TIME	ENDING TIME
SET UP DATE(S)				
ACTUAL EVENT DATE(S)				
TAKE DOWN DATE(S)				

7. Event location (check as many as appropriate): _____ Street _____ Public Lot _____ City Park/Plaza

NOTICE ONE LOCATION PER APPLICATION. IF YOU CHECKED STREET OR PUBLIC LOT, CONTACT THE DPW SPECIAL EVENT OFFICE AT 410-396-1916.

8. Please list the **NAME** (and address or closest cross streets) of the PARK OR PLAZA. Also include names of **Pavilions, Gazebos**, or specific area information for this event: _____

9. TOTAL number of participants (i.e., volunteers, walkers, etc.) and spectators anticipated daily? _____

Date Recvd _____ Application Fee _____ Area/Pavilion Fee _____ Security Deposit _____ Application #SE _____

10. Is this a first time event for you or the sponsoring organization at this location? ☐ YES ☐ NO
a. If NO, how does this event differ from previous years? _____

- b. Attendance totals for last event: _____ DAILY TOTAL _____ OVERALL TOTAL
11. How do you plan to publicize this proposed event? (If available, please attach a copy of publicity plan or flyer.)

12. Will any signs, banners, or flyers be hung or posted (other than on stages or booths)? ☐ YES ☐ NO
NOTICE: IT IS A VIOLATION OF THE DEPARTMENT OF RECREATION & PARKS' RULES AND REGULATIONS TO POST OR HANG IN ANY MANNER, DIRECTIONAL MARKERS, NOTICES, OR BANNERS TO ANY TREE OR LAMP POST.
13. Please describe the proposed location(s) of the signs, banners, etc. (attach a site plan if available):

14. Will any public street(s) need to be partially closed or blocked off in conjunction with this event? ☐ YES ☐ NO
NOTICE: IF YES, THE APPLICANT MUST OBTAIN A SPECIAL EVENT PERMIT FROM THE DPW SPECIAL EVENT OFFICE, (410)396-1916, MUNICIPAL BLDG., 200 N. HOLIDAY ST. LOBBY, BALTIMORE MD 21202.
15. Do you plan to erect temporary structures, such as STAGES, BOOTHS, TABLES, TENTS, DISPLAYS, ETC., for this event? ☐ YES ☐ NO
a. If YES, please describe below including size(s), how many, capacity, etc. A site plan and/or drawing must be included with this application showing the location of all items.
STAGES: _____
BOOTHS/TABLES: _____
DISPLAYS: _____
TENTS: _____
OTHER EQUIPMENT: _____
- b. If tent(s) will be erected, list the name of tent company, address, telephone number and the contact person's name:
NAME OF TENT COMPANY: _____
ADDRESS: _____
CONTACT PERSON: _____ TELEPHONE () _____
NOTICE: PLEASE CONTACT THE DEPT. OF HOUSING & COMMUNITY DEVELOPMENT, BUILDING INSPECTIONS (410)396-3470, AND THE BCFD FIRE PREVENTION BUREAU (396-4058) TO APPLY FOR ADDITIONAL PERMITS.
16. Will any type of sound amplifying equipment or devices be used in conjunction with this event? ☐ YES ☐ NO
If YES, please list the type of equipment: _____

- NOTICE: THE SPONSORING ORGANIZATION(S)/ EVENT COORDINATOR(S) MUST COMPLY WITH ALL BALTIMORE CITY ORDINANCE(S) REGARDING ACCEPTABLE NOISE LEVELS. SOUND AND/OR NOISE LEVELS MUST NOT DISTURB VISITORS IN THE AREA, AND MUST NOT INTERFERE WITH THE NORMAL OPERATION OF BUSINESSES IN THE VICINITY. ALL MUSIC/AMPLIFIED SOUND MUST END AT 9:00 P.M.**
17. Do you plan to provide musical entertainment for this event? ☐ YES ☐ NO
If YES, please describe below (i.e., Big Band, Reggae Band, Singer, etc.): _____

18. Do you plan to provide other entertainment for this event? ☐ YES ☐ NO
If YES, please describe below, or attach a copy of your planned program: _____

19. Do you plan to have animals on site during this event? ☐ YES ☐ NO
If YES, please list how many, the type of each animal; what provisions have been made for the care, containment, and waste removal of these animals? Please give a contact person's name and phone number below: _____

CONTACT PERSON: _____ DAYTIME PHONE: () _____

NOTICE: PONY RIDES ARE NOT PERMITTED IN PARKS/PLAZAS UNDER THE JURISDICTION OF CITY OF BALTIMORE DEPARTMENT OF RECREATION AND PARKS.

20. Are you providing a generator as a power source? ☐ YES ☐ NO
21. Are you requesting the use of electricity? ☐ YES ☐ NO
If YES, please list operational needs: _____

22. Is a power source available at the proposed location? ☐ YES ☐ NO
If YES, is access available or will it have to be turned on (please explain): _____

23. Will electrical wiring need to be installed? ☐ YES ☐ NO
NOTICE: IF YES, YOU MUST CONTACT THE DPW SPECIAL EVENT OFFICE (396-1916), AND PROVIDE A SITE PLAN LISTING ELECTRICAL NEEDS.

24. Is this event open to the public? ☐ YES ☐ NO

25. Will donations/contributions be accepted or solicited during this event? ☐ YES ☐ NO
- a. If YES, please explain how these donations will be generated or solicited: _____
- b. List all parties who will receive the proceeds from the donations or contributions: _____

26. Will a registration, membership, or admission fee be required in order to attend or participate in the event activities? ☐ YES ☐ NO
If YES, please explain the type of fee, amount and purpose of the fee: _____

27. Do you plan to have Money/Prize Wheels, Raffle, Bingo, etc., on site, in conjunction _____ YES ☐ NO
If YES, list the type of activity and the licensee for each type? _____

NOTICE: A PERMIT IS REQUIRED BY LAW. PLEASE CONTACT THE BALTIMORE CITY POLICE DEPARTMENT ON (410)396-2130, LEAST 6 WEEKS PRIOR TO YOUR EVENT DATE.

28. Do you plan to SELL, DISTRIBUTE, OR GIVE-A-WAY refreshments, and/or merchandise in conjunction with this event? ☐ YES (SELLING) ☐ YES (GIVE-A-WAY) ☐ NO
If YES, please explain: _____

NOTICE: A FOOD PERMIT MAY BE REQUIRED IF FOOD/ REFRESHMENTS ARE SERVED IN CONJUNCTION WITH AN EVENT. PLEASE CONTACT THE BCHD FOOD PERMITS DESK (396-4544).

- a. IF YES, how many merchandise booths/tables will be set-up? _____
- b. If YES, how many food booths/tables will be set-up? _____

29. Will gas grills or propane stoves, etc., be used during this event? _____ YES _____ NO
**NOTICE: THE APPLICANT/PERMITTEE MUST PROVIDE APPROPRIATE SAFETY EQUIPMENT (FIRE EXTINGUISHERS, ETC.).
OPEN BURNING AND/OR GROUND FIRES ARE PROHIBITED.**

30. Do you plan to SERVE OR SELL beer or light wine during this event? _____ YES _____ NO
If yes, please explain: _____

NOTICE: A LIQUOR LICENSE IS REQUIRED. CONTACT THE LIQUOR LICENSE COMMISSIONER'S OFFICE (396-4377).

31. How many port-a-johns are you providing for your event, and where will they be set up? _____

NOTICE THIS SERVICE IS NOT PROVIDED BY THE CITY OF BALTIMORE.

32. Please describe how do you plan to remove refuse and garbage from the event site, and list the Clean up Committee Chairperson's contact information: _____

NAME: _____ DAYTIME PHONE: () _____

33. Do you require additional trash receptacles, dumpster(s), or load packer(s) for this event? _____ YES _____ NO
**NOTICE: ADDITIONAL FEES ARE CHARGED BY THE BUREAU OF SOLID WASTE, WHEN EXTRA TRASH RECEPTACLES,
DUMPSTER(S) or LOAD PACKER(S) ARE PROVIDED FOR SPECIAL EVENTS.**

- a. If YES, please list how many on the appropriate line below:

_____ TRASH RECEPTACLES _____ DUMPSTER(S) _____ LOAD PACKER(S)

- b. Where exactly at the event site should the above items be delivered? (Attach a site plan if special placement is requested) _____

34. What are your plans for providing security, traffic and/or crowd control? Please list contact person, phone number, and the name and address of security firm, if applicable. _____

CONTACT PERSON: _____ PHONE: () _____

NAME OF SECURITY FIRM: _____

ADDRESS: _____

35. What are your plans for providing emergency medical/services? _____

36. Are there any special provisions pertaining to your event which has not been addressed on this application? _____

Submitting this Special Event Application is not a confirmation to conduct your planned event. If the date and/or location requested is not available or if the location requested is not an approved site to conduct your proposed event, you will be contacted by the Department and alternate arrangements will be suggested or made. Your confirmation will be in the form of a PERMIT, issued to the Organization and/or person responsible for conducting the event. Please DO NOT SEND OUT EVENT NOTICES, PUBLICITY, FLYERS, ETC., prior to receiving this confirmation.

If this event will generate proceeds, funds or donations, YOU MUST INCLUDE PROOF OF YOUR ORGANIZATIONS NONPROFIT PROFIT STATUS with this application. (I.E., Tax-Exempt Recognition from the Internal Revenue Service; Maryland State Department of Assessments and Taxation or a copy of the page from the Baltimore City Community Organization Directory with the community organization listed.

By signing and submitting this application, you and/or the sponsoring organization(s) agree to abide by the rules and regulations of the Department of Recreation and Parks, especially those rules and regulations pertaining to permits.

All fees, agency reimbursement costs (i.e., security, traffic control, electric, clean up, etc.), security deposits, and/or additional documents (i.e., Site Plan(s), proof of Liability Insurance, Nonprofit Status, etc., if required), must be paid and/or received by the permit office before your permit is issued. Please place a check mark (✓) next to all items included and/or attached to this application:

<input type="checkbox"/> APPLICATION FEE(\$35.00)	<input type="checkbox"/> ADDITIONAL DATE(S) USER FEE
<input type="checkbox"/> ADDITIONAL EVENT INFORMATION	<input type="checkbox"/> EVENT SITE PLAN
<input type="checkbox"/> REFUNDABLE SECURITY DEPOSIT (\$1,000)	<input type="checkbox"/> PROOF OF NONPROFIT STATUS
<input type="checkbox"/> LIABILITY INSURANCE (\$1,000,000)	<input type="checkbox"/> AREA/PAVILION FEE (\$100.00 EACH)

PLEASE NOTE: When liability insurance is required, a copy of the certificate of Insurance must be submitted to the Permit Office ONE (1) MONTH PRIOR TO THE PROPOSED EVENT. The certificate of insurance MUST HAVE THE FOLLOWING WORDING included in the description box:

"The Mayor and City Council of Baltimore City, the Departments of Recreation & Parks, Public Works and Employees of the City of Baltimore are named as additional insured for (INSERT NAME OF EVENT) on (LIST EVENT DATES, INCLUDING STARTING SET UP DATE THROUGH ENDING TAKE DOWN DATE) to be held at (INSERT EVENT LOCATION)."

THE DEPARTMENT CAN NOT ACCEPT PERSONAL CHECKS or CASH. Payment of fee(s) must be in the form of a Cashiers Check, or Money Order ONLY! Payable to the Director of Finance

Permits will only be issued to persons 21 years of age or older with a photo ID, and permits are non-transferable.

PLEASE SIGN AND DATE (BELOW) BEFORE RETURNING THIS APPLICATION

Applicant's Signature

(Date)

Please Print Applicants Name Here

Return this application, and the items you have checked above to:
BALTIMORE CITY DEPARTMENT OF RECREATION AND PARKS
Permit Office - 3001 East Drive
Baltimore Maryland 21217

IF YOUR EVENT IS CANCELED OR POSTPONED, A COURTESY CALL TO THE PERMIT OFFICE
(410-396-6003/6-7070 MONDAY THROUGH FRIDAY 10:00 A.M. TO 3:00 P.M., WOULD BE APPRECIATED.

ADDENDUM TO APPLICATION FOR PERMIT

(Must be signed and attached to all applications)

AS A CONDITION OF YOUR PERMIT
PLEASE READ, SIGN, AND DATE
THE FOLLOWING STATEMENT:

As the contact and/or person responsible for conducting an event on property under the jurisdiction of the City of Baltimore Department of Recreation and Parks, I agree to **END/STOP** all amplified sound and/or music (whether live or recorded) **AT 9:00 P.M.**

I also agree that during my event/activity, amplified sound and/or music must be maintained at a reasonable level so as not to disturb, interfere, or compete with other park activities, or impact on surrounding businesses or neighborhood(s).

Whereas I also agree that during my event/activity, there will be no heavy equipment and/or vehicle on any grass or lawn areas. Parking is **PERMITTED ON PAVED ROADS ONLY**, in parks which are open to vehicular traffic. Please keep in mind that police will ticket vehicles parked on the grass, or when parked on roads posted with "NO PARKING" signs, and in parks posted "OFFICIAL VEHICLES ONLY".

I also agree by signing and dating this form that I have received and will review the copy of Rules and Regulations of the City of Baltimore, Department of Recreation and Parks. I have also been informed that the Baltimore City Police Department and Park Rangers will also enforce the Rules and Regulations.

(Signature and Date)

(FOR OFFICE USE ONLY)

Application Fee	___ Yes ___ No	Check # _____	MO# _____	Receipt# _____
Pavilion Fee	___ Yes ___ No	Check # _____	MO# _____	Receipt# _____
Electric Fee	___ Yes ___ No	Check # _____	MO# _____	Receipt# _____
Other Fees	___ Yes ___ No	Check # _____	MO# _____	Receipt# _____

EXPLANATION OF OTHER FEES: _____

D.P.O. # _____ Series # _____ Date _____ Amt _____

NOTIFICATION AND/OR CONTACT WITH APPLICANT

List dates/time, reason, how contacted (phone/mail), and name of person initiating contact. If the contact was made by telephone and a message was left for the applicant, list the name of the person the message was left with. If notification was sent by mail, attach a copy of the correspondence
